

CITY OF LAS VEGAS  
DEPARTMENT OF BUILDING & SAFETY  
PERMIT APPLICATION

BAR CODE HERE

TYPE OR PRINT (BLACK INK ONLY)

Project # 155049-C-10

Parent Project # 28930

FOR: ☒ Commercial & Public Structures ☐ Single Family Residence

WORK DESCRIPTION: EXTERIOR ENCLOSURE FHD

PERMITS REQUESTED: ☒ Building ☐ Mechanical Val \_\_\_\_\_

☐ Plumbing Val \_\_\_\_\_ ☐ Electrical Val \_\_\_\_\_

TOTAL VALUATION: \$ 10,000

ADDRESS: 300 STEWART ZIP 89101

OWNER/BUILDER NAME: CITY OF LAS VEGAS

CONTRACTOR: APCO 2000+

PROJECT/BUSINESS NAME: LY MUSEUM RELAT

CONTACT PHONE NO.: 469-2701 CONTACT FAX NO.: \_\_\_\_\_

STATE CONTRACTOR LICENSE NO.: \_\_\_\_\_ CITY BUSINESS LICENSE NO.: \_\_\_\_\_

PARCEL NO.: \_\_\_\_\_ ZONE: \_\_\_\_\_

LOT(s): \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_

OCCUPANCY GROUP: \_\_\_\_\_ USE: \_\_\_\_\_ CONST. TYPE: \_\_\_\_\_

SQUARE FT OF FLOOR AREAS: 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_ Garage \_\_\_\_\_

Patio \_\_\_\_\_ Balcony \_\_\_\_\_ Total \_\_\_\_\_ No. of Units \_\_\_\_\_ No. of Stories \_\_\_\_\_

SPECIAL CONDITIONS: \_\_\_\_\_

I state that the information I have supplied on this application is true and correct. By signing this application, I agree to comply with all conditions as noted on this permit.

Contractor or Agent / Owner \_\_\_\_\_ Date \_\_\_\_\_

Planning Department \_\_\_\_\_ Date \_\_\_\_\_

Land Development/Flood Control Engr. \_\_\_\_\_ Date \_\_\_\_\_

Fire Department \_\_\_\_\_ Date \_\_\_\_\_

Building Department \_\_\_\_\_ Date \_\_\_\_\_

TOTAL PERMIT FEE: \$ 125.

PRE-PAID: Plan Review \$ \_\_\_\_\_

PRE-PAID: Zoning \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

**Permit Expires 180 Days After  
Abandonment of Work**

Permits expire when no inspection has been requested for any  
180-day period after the permit has been issued.



## CONTACT SHEET

All plan submittals shall include this form.

Call BRIAN BENSON at (702) 469-2701 when plans are ready.

Application # 155049-C-10 PC # 28930

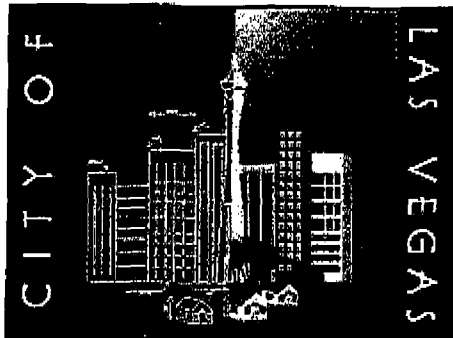
OWNER / DEVELOPER <u>CITY OF LV - SAM TULLMAN</u>		PHONE <u>229-2091</u>
ADDRESS <u>400 STEWART AVE</u>		E-MAIL
ZIP <u>89101</u>		FAX <u>964-2560</u>
ARCHITECT <u>West Lake Reed Leskusk</u>		PHONE <u>602-212-0451</u>
ADDRESS <u>ONE EAST COMMERCE RD PHX AZ</u>		E-MAIL <u>RMDTH@WLRL Design.com</u>
ZIP <u>85012</u>		FAX <u>602-212-1010</u>
STRUCTURAL ENGINEER <u>FRANK SHIELDS</u>		PHONE <u>771-829-9277</u>
ADDRESS <u>181 CADILLAC BL Reno NV</u>		E-MAIL <u>771-829-9259</u>
ZIP <u>89509</u>		FAX
CIVIL ENGINEER		PHONE
ADDRESS		E-MAIL
ZIP		FAX
CONTRACTOR <u>APCO</u>		PHONE
LICENSE #		E-MAIL
ADDRESS		FAX
ZIP		
ELECTRICAL ENGINEER / CONTRACTOR		PHONE
LICENSE #		E-MAIL
ADDRESS		FAX
ZIP		
MECHANICAL ENGINEER / CONTRACTOR		PHONE
LICENSE #		E-MAIL
ADDRESS		FAX
ZIP		
PLUMBING ENGINEERING / CONTRACTOR		PHONE
LICENSE #		E-MAIL
ADDRESS		FAX
ZIP		

TRANSMISSION VERIFICATION REPORT

TIME : 01/29/2010 08:18  
NAME :  
FAX :  
TEL :  
SER. # : BROJ6J530588

DATE, TIME	01/29 08:18
FAX NO./NAME	3669537
DURATION	00:00:14
PAGE(S)	01
RESULT	OK
MODE	STANDARD ECM

**BUILDING & SAFETY**



**DEVELOPMENT  
SERVICES CENTER**

DSC, Permits Division  
731 South 4th Street  
Las Vegas NV 89101  
702-229-6251  
702-474-7369 FAX  
8AM to 5PM on Mon/Tue/Thu/Fri  
8:30AM to 5PM on Wed

**PLAN READY  
NOTICE**

*fax # 366-9537*

**Total Fees Due: 125.00**

Date: 1/29/2010

To: APCO CONSTRUCTION

Re: **AP# 155049 REVISIONS**

CITY OF LAS VEGAS MUSEUM

**Fee Breakdown**

ADMIN	50.00
PLAN CHECK	75.00

**Building & Safety Fees Due: 125.00**

Your plans are ready to be picked-up. Please pull a ticket to see a cashier, and if paying by check, make it payable to the City of Las Vegas. MasterCard, Visa, and Discover credit/debit cards are also accepted. If you have any questions, please call the number above.

**When picking-up a permit:**  
Licensed contractors must provide their: